

#6/C 3,17.03

PATENT 450110-02761

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s)

Mark John McGrath

Serial No.

09/713,420

For

DATA PROCESSOR AND DATA PROCESSING

METHOD

Filed

November 15, 2000

RECEIVED
MAR 1 3 2003

Examiner

James A. Fletcher

Technology Center 2600

Art Unit

2615

745 Fifth Avenue

New York, New York 10151

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, DC 20231, on March 3, 2003.

Bruno Polito, Reg. No. 38,580

Name of Applicant, Assignee or Registered Representative

March 3, 2003

Date of Signature

AMENDMENT

Assistant Commissioner for Patents Washington, D.C. 20231

Sir:

In response to the Office Action mailed November 8, 2002, please amend the

above-identified application as follows:

03/12/2003 DTESSEM1 00000039 09713420

01 FC:1251

110.00 OP

-1-

00107047

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

John McGrath

Serial No.

09/713,420

Filed

November 15, 2000

For

DATA PROCESSOR AND DATA PROCESSING METHOD

Examiner:

James A. Fletcher

Art Unit :

Washington, D.C. 20231

2615

ASSISTANT COMMISSIONER FOR PATENTS

RECEIVED

MAR 1 3 2003

Technology Center 2600

Sir:

The fee has been calculated as shown below.

Transmitted herewith is an amendment in the above-identified application. No additional fee is required.

This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.

Claims as Amended

(1)	(2) Claims remaining	(3)	(4) Highest number	(5)	(6)	(7)
	after amendment		previously paid for	Present extra	Rate	Additional fee
Total claims	42	Minus	42 =	0 ×	\$18(9)	= \$00.00
Independent claims	2	Minus	3 =	0 ×	\$84(42)	= \$00.00
			Total additional fee for this amendment			\$00.00

- If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
- If the highest number of total claims previously paid for is less than 20, write "20" in this space.
- If the highest number of independent claims previously paid for is less than 3, write "3" in this space.
- This application contains a multiple dependent claim. The required fee of \$280 (\$140) has been previously paid _, or is paid herewith __.
- This response is being filed within the X first month, _ second month, _ third month, _ fourth month following the expiration of the <u>X</u> term originally set therefor, and the fee of \times \$110 (\$55), _\$410(\$205), _\$930(\$465), _\$1,450(\$725) for the requisite extension paid herewith.
- A check in the amount of \$110.00 is attached. X
- Charge \$_ to Deposit Account No. 50-0320.
- Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320. <u>X</u>

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Bruno Polito, Reg. No. 38,580

Name of Applicant, Assignee or Registered Representative

Signature

March 3, 2003

Date of Signature

FROMMER LAWRENCE & HAUG, LLP Attorneys for Applicant(s)

By: Bruno Polito Reg. No. 38,580

Tel. (212) 588-0800